



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIB DATA SHEET

CONFIRMATION NO. 8816

| SERIAL NUMBER | FILING or 371(c) DATE RULE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. |
|---------------|----------------------------------|-------|----------------|------------------------|
| 10/597,981 | 08/15/2006 | 372 | 1794 | 09792909-6759 |

APPLICANTS
 Yasunori Kijima, Tokyo, JAPAN;
 Tetsuo Shibamura, Kanagawa, JAPAN;
 Shigeyuki Matsunami, Kanagawa, JAPAN;
 Yoichi Tomo, Kanagawa, JAPAN;

**** CONTINUING DATA *******
 This application is a 371 of PCT/JP05/03080 02/18/2005

**** FOREIGN APPLICATIONS *******
 JAPAN 2002-040927 02/18/2004
 JAPAN 2004-040928 02/18/2004
 JAPAN 2004-153204 05/24/2004
 JAPAN 2004-334193 11/18/2004
 JAPAN 2005-008548 01/17/2005

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****
 04/28/2007

| | | | | | |
|--|--|-------------------------|------------------------|---------------------|---------------------------|
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | JAPAN | 16 | 22 | 3 |
| Verified and /GREGORY D CLARK/ Acknowledged Examiner's Signature | Initials | | | | |

ADDRESS
 SONNENSCHN NATH & ROSENTHAL LLP
 P.O. BOX 061080
 WACKER DRIVE STATION, SEARS TOWER
 CHICAGO, IL 60606-1080
 UNITED STATES

TITLE
 Display device

| | | |
|------------------------------------|---|--|
| FILING FEE RECEIVED 1000 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees |
| | | <input type="checkbox"/> 1.16 Fees (Filing) |
| | | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
| | | <input type="checkbox"/> 1.18 Fees (Issue) |
| | | <input type="checkbox"/> Other _____ |
| | | <input type="checkbox"/> Credit |